

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | Deane | | 07-17-01 |
| O.I.P.E. CLASSIFIER | | -12 | 1/15/01 |
| FORMALITY REVIEW | MM | 920 | 08-24-01 |
| RESPONSE FORMALITY REVIEW | SG | 1077 | 11/15/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | |
| Original | |
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| 2 | 11/10/02 |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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08-27-01
 11/15/01
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